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ABSTRACT

The handbook is a description of pupil personnel services available in the schools under the jurisdiction of the Protestant School Board of Greater Montreal. In addition to describing services for handicapped children offered by the Board, the handbook provides some guidelines for identifying exceptional children and referring them for placement. It also describes the general services provided by the Medical, and the Social Work and Attendance, Divisions of the Student Personnel Services Department. The services for handicapped children covered include classes for children with specific learning disabilities, communication disability classes, facilities for socially maladjusted children, and classes for emotionally disturbed, partially sighted, and educable mentally retarded children. (KW)

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Handbook on Special Education

A DESCRIPTION OF PUPIL PERSONNEL SERVICES AVAILABLE IN THE SCHOOLS UNDER THE JURISDICTION OF THE PROTESTANT SCHOOL BOARD OF GREATER MONTREAL

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Handbook on Special Education

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1971

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INTRODUCTION

Atypical or exceptional children are those who deviate from the average in physical, mental, emotional, or social characteristics to such an extent that they require special educational services to develop to their maximum capacity.

Wherever possible, special attention is given to exceptional children within the regular classroom. Where children with specific disabilities are grouped, by necessity, in small classes, every effort is made to integrate their activities into the regular routine of the school.

Before any placement is made, a child is given an individual assessment. Parents are made aware of this assessment and its implications for the child's progress in school.

Whenever it is beneficial to the pupil's educational and social growth, alternate placement or a return to regular class is considered on a part-time or full-time basis.

This Handbook on Special Education is designed to give a description of the services offered by this Board, and also to provide some guidelines with regard to identification and the referral procedure for placement.

In addition to outlining the services offered specifically for exceptional children, this Handbook describes also the general services provided by the Medical, and the Social Work and Attendance, Divisions of the Student Personnel Services Department.

CLASS FOR CHILDREN WITH SPECIFIC LEARNING DISABILITIES

Definition:

Children of normal or potentially normal mental ability who are unable to learn in the ordinary school situation, and whose problems are not due primarily to visual, hearing, or motor handicaps, to emotional disturbance, or to environmental disadvantage. They often have difficulty with language, reading, writing, spelling, or arithmetic. Due to disorders in one or more psychological processes, they may be slow and inefficient in learning to understand the messages which eyes and ears receive, or in integrating, storing, and retrieving information, or in gaining precise control over movement, expression and behavior.

In addition, they may show an abnormal motor activity level, either hyperactivity/hypoactivity, short attention span and/or distractibility.

Admission Policy:

There are currently three full-time classes for children with specific learning disabilities two of them located at Willingdon School and one at Parkdale School. These classes were established after two years of research by the committee on Perceptual Training.

Criteria -- Pupils are selected on the basis of the following considerations:

1. A candidate must be enrolled in an elementary school.

2. The child's cognitive potential must be estimated at least average, even though the assessed I.Q. or functional level may be lower.

3. The individual psychological evaluation should include at least the following areas: cognitive potential; language abilties; visual perception; auditory processing; memory; gross and fine motor functions; and an educational evaluation.

4. A case history of the family, including the developmental history of the child, is obtained by the pschologist, the social worker, or the doctor.

5. Each candidate is examined by a team of medical specialists on the recommendation of the examining doctor or psychologist.

6. An Admissions Committee consisting of at least the following membership recommends placement: a psychologist or guidance consultant, a teacher from the Learning Center of the Montreal Children's Hospital, the principal and teacher of the class, the Co-ordinator of Guidance and Educational Services, and the Board's Medical Consultant.

Program:

These classes are set up as Self-Contained Classrooms with children attending full time. The program is highly individualistic and flexible, because the problems of the pupils are usually developmental. More emphasis is placed on training developmental skills needed for learning than on the conventional academic disciplines.

The training program which is intended to help the children with their special problems concentrates on 5 areas:-

1) Motor Co-ordination:

a) Gross muscle training - which develops control and integration of the large muscles of the body, as well as body image, laterality, directionality, and perception of distance and depth.

b) Fine muscle training - which develops control of the finer muscles, such as those of the fingers, and co-ordination of movements of the hands; important for writing, daily living situations as dressing self, cutting, eating, etc.

2) Visual Perception:

Visual space is two-and three-dimensional. The two-dimensional visual perception is particularly important in learning to read; for as a pre-requisite to learning to read, the child must be able to discriminate between forms. Needed is the ability to analyse and synthesize forms--attention must be brought to details of forms as well as seeing part/whole relationships and then whole figure against a background.

3) Perceptual-Motor Co-ordination:

For practically all motor co-ordination, visual motor co-ordination (e.g. co-ordination between what the eye perceives and what the hand does) is required.

Particularly refined perceptual motor co-ordination is needed for the task of copying, drawing, printing, writing. The child must be able to perceive correctly and then control the movements, and co-ordinate the movements with his visual perception.

4) Auditory Perception and Verbal Expression:

The aim in this area of the program is to help develop accurate perception and reproduction of sounds, and words, together with language development.

5) Number Concepts:

The child must be able to discover the meaning of numbers--that a number represents a certain quantity. Difficulty arises if the child's perception is impaired, in that there may be difficulty in perceiving that a small group of objects occupies less space and makes a different configuration than a larger group of objects.

The child may have difficulty in finding his way through the fixed sequence of numbers. In so far as impaired perception is the cause of a poor number concept, all exercises in the perceptual area will help the child also to develop numerical sense.

(Van de Gegte, H.G., & Hoddinott, B.A., Rehabilitation Program for Children with Specific Learning Disabilities - Canadian Association for Children with Learning Disabilities.)

A general subject outline is listed below in which the five above-mentioned training areas are incorporated:-

a) Gym: Gross Motor Training and Perc. Motor Co-ordination

b) Charts: Calendar: Sequence - Number Concepts

c) Reading Activities: Visual Perception
Auditory Perception
Verbal Expression

d) Visual Motor Activities: (Writing Activities) Fine Muscle Training
Perc. Motor Co-ordination
Visual Perception

e) Arithmetic Activities: Number Concepts
Verbal Expression

f) Individual Activities: Child works on own areas of deficit.

g) Language Development: Verbal Expression
Information
Auditory Perception

h) Handwork: Perceptual: Motor Co-ordination
Fine Muscle Training
Organization Processing

i) Literature: Auditory Perception
Verbal Expression

j) Music/Rhythm/Poetry: Used as means of integrating all activities mentinned above.

It should be noted that the nature of the students' learning problems demands that the subjects be treated differently than they would be in a normal elementary class. Briefly stated, the difference is that these students have a more urgent need for a multi-sensory approach to learning: they have to be taught through the combined use of sight, hearing, touch, taste and smell.

The philosophy of the Perceptual Training Committee regarding the class for Specific Learning Disabilities is that the students be integrated into the normal program as soon as they are ready to profit from it.

Existing Facilities:

A) Within the Protestant School Board of Greater Montreal---

1. There are three full-time classes for children of 6 - 9 years of age. These classes are established on an experimental basis, and are located in Willingdon and Parkdale schools. The maximum enrolment in each class is eight children.

2. Four teachers have been seconded to the Learning Centre of the Montreal Children's Hospital.

3. There are approximately 25 Reading Adjustment Teachers working with children with perceptual handicaps in the elementary schools as part of the Adjustment Program.

4. Some special class teachers and certain teachers of Physical Education employ remedial exercises designed to aid the children with perceptual handicaps who are in their classes.

B) Within the Community -
Through Private arrangements and at the expense of the individual parent:-

1. Montreal Children's Hospital: The Learning Center at M.C.H. provides a remedial program for children with learning problems. Applicants for the program must be of normal or higher intelligence and are preferably of elementary school age. In cooperation with the Protestant School Board of Greater Montreal, the Montreal Childrn's Hospital Learning Center sponsors a summer program at Westmount Park School.

2. YM-YWHA: The YM-YWHA runs a program in conjunction with a private practitioner who specializes in visual problems. The program includes co-ordination classes in which the emphasis is on gross-motor activities. Children in these groups do not display severe learning problems, and must be no younger than grade one level to be considered.

   The YM-YWHA also runs a Swim and Supper Club Program. This program is predominantly for children who have severe perceptual problems, are emotionally disturbed and/or educably mentally retarded. The Swim and Supper Club emphasizes social interaction.

   Classes are held at different branches of YM-YWHA.

3. Camp Wooden Acres: This camp is an affiliate of Jewish Community camps and offers a four week summer program for children with learning disabilities. Two groups of boys 10 - 14½ years and girls 9 - 13 years attend this camp each summer. Each group consists of six children. The activities are geared to meet the needs of each child and are part of a regular camp situation.

4. Town of Mount Royal: There is a program for children with learning problems at the town recreation center. After school 2 or 3 times per week 10 children attend classes in perceptual training at the recreation center.

5. Quebec Association for Children with Learning Disabilities: This is a provincial organization with national affiliations, organized mainly by parents, to offer advice and assistance to parents of children with learning disabilities, in the area of diagnosis, remedial work and liaison with public school systems. The Association publishes a monthly news bulletin, and its office provides library facilities, films, film strips, and the services of a speakers' bureau.

6. City of Westmount Health Department: has initiated a project in co-operation with the Protestant School Board of Greater Montreal dealing with early identification of learning problems and remedial work.

COMMUNICATION DISABILITY CLASSES

Definition:

A communication disorder is a lack of ability in receiving, organizing, or using language. Language is necessary for symbolic behaviour, which is behaviour based on the understanding of objects or events.

The most common causes of communication disabilities are brain injury, cerebral dysfunction, or the inability to hear. Children with communication disabilities require special developmental language programs to allow them to learn.

Children in classes for communication disabilities have given evidence of learning potential with some of the following difficulties:

1. in understanding spoken or written words or sentences;
2. in recognizing or naming objects;
3. in understanding or explaining likenesses and differences;
4. in remembering objects or sequences of occurrences;
5. in expressing verbal or written ideas.

There are two kinds of classes for children with communication disabilities in the schools of the Greater Montreal Board:

A. Hard of Hearing (junior and senior):

B. Aphasic.

A. CLASSES FOR HARD OF HEARING CHILDREN

Definition:

Hard of hearing children have hearing impairments and often a secondary handicap of retarded speech and language development. Many of the children have additional handicaps such as minimal brain damage, poor co-ordination, and emotional instability.

Admission Policy:

(a) Criteria --

1. hearing impairment;
2. inability to progress in a regular class because of the handicap and the need for special instruction;
3. assessment and recommendation of audiologist and pediatrician.

More effective learning experiences can be provided if the handicap is diagnosed early, before failure affects the child's attitudes.

(b) Observable Behaviour Symptoms--

1. failure to respond when called;
2. head turning to bring one ear closer to the speaker or source of sound;
3. misinterpretation or lack of response to directions;
4. appearance of being slow, dull or a problem;
5. inattention, day-dreaming;
6. peculiar voice quality (loud, soft, monotone);
7. inarticulate speech and confusion of sound-alike words.

(c) Procedure -

After identification is made by the child's class teacher and principal the following steps are necessary:-

1. preliminary screening by the P.S.B.G.M. audiologist on a pure tone audiological test or by the child's family doctor;

2. referral to a hospital for futher evaluation: audiometric: speech and language: perceptual: central nervous system: psychometrical: emotional adjustment;

3. consideration of the evaluations by the P.S.B.G.M. psychologist responsible for children in the Communication Disability Classes and a recommendation for placement in one of the classes;

4. parental consent;

5. decision for acceptance in a class by the principal and teachers of the school where the classes are located.

Program:

The program for these children includes specialized instruction in speech and language development (lipreading, perceptual development, auditory training) as well as the development of reading and computation skills, music, gym, and life experiences. Special learning materials are used in conjunction with regular class materials. Individualized programs and instruction, possible in a small group setting, are provided for each child. Pupils participate in school activities (assemblies, concerts) and also take some lessons (music, gym, home economics, industrial arts) with regular classes.

The classrooms are equipped with modern amplification units fitted with individually-controlled binaural head sets, radio and record player.

In this remedial setting the average child is expected to catch up academically in a relatively short period of time. As soon as the child has been assessed as being able to manage instruction in a regular class setting, a transfer is effected. However, total rehabilitation is not possible for every child and the duration of the placement is based on the individual needs of the child.

Existing Facilities:

(a) Within the Greater Montreal Board--

1. One Junior Hard of Hearing Class for children at the primary level at Herbert Symonds School (8 - 10 children).

2. One Senior Hard of Hearing Class for children at a more advanced elementary level at Herbert Symonds School (8 - 10 children).

3. Some deaf children with special technical equipment provided by Montreal Oral School for the Deaf are integrated in regular classes at Iona Avenue School and Coronation School.

(b) Within the Community--

1. Mackay Centre provides for the education of deaf children. In addition the Centre provides vocational assessment, job training and placement.
2. Montreal Oral School for Deaf Children.

B. CLASS FOR APHASIC CHILDREN

Definition:

Aphasic children are those who have a loss or impairment of the ability to use and/or understand spoken and written language. Aphasic disabilities have been categorized according to three functional areas: Expressive Aphasia, a disorder in communication or speech, Receptive Aphasia, a disorder in understanding what is said, and Central Aphasia, a disorder in central symbolic functioning which affects all language ability.

Admission Policy:

(a) Criteria--

1. inability to understand or use language;
2. inability to progress in a regular class due to the handicap, and the need for special instruction.

More effective learning experiences can be provided if the handicap is diagnosed early.

(b) Some Observable Symptoms--

1. unintelligible speech;
2. inconsistent response to sound stimuli;
3. deficiencies in auditory and visual perception;
4. high distractibility.

(c) Procedure--

After identification is made by the child's class teacher and principal the following steps are necessary:-

1. preliminary screening by one of the Board's Guidance Consultants or Psychologists for psychological and language evaluation;

2. referral to a hospital for further evaluation: audiometric: speech and language: perceptual: central nervous system: psychometrical: emotional stability;

3. consideration of the evaluations by the P.S.B.G.M. psychologist responsible for children in the Communication Disability Classes and a recommendation for placement in one of the classes;

4. parental consent;

5. decision for acceptance in the class by the principal and teacher of the school where the classes are located.

Program:

The program for these children includes specialized instruction in speech, language and perceptual development as well as the development of reading and computation skills, music, gym, and life experiences. Individualized programs and instruction, possible in a small group setting, are provided for each child and special learning materials are used in conjunction with regular class materials. Pupils participate in school activities (assemblies, concerts) and also take some lessons (music, gym, home economics, industrial arts) with regular class pupils.

The classroom is equipped with special flooring and ceiling to reduce distraction from extraneous sounds and individual work cubicles are available for the highly distractible child. An amplification training unit is a valuable teaching aid.

As soon as the child is able to manage instruction in a regular class setting, arrangements are made for a trial series of daily lessons. If the trial is successful, the number of lessons is increased until a complete transfer is effected. Children who continue to require the special educational program remain in the class until provision for their needs can no longer be satisfied.

Existing Facilities:

(a) Within the Greater Montreal Board--
1. one class at Herbert Symonds School (4 - 6 children);

(b) Within the Community--
1. Mackay Centre provides vocational assessment, job training and placement for some aphasic children with severe hearing defects;

2. after age 16, the Constance Lethbridge Rehabilitation Centre provides a similar service.

CLASSES FOR EMOTIONALLY DISTURBED CHILDREN

Definition:

The term 'emotional disturbance' is a many-faceted, umbrella-like, rather nebulous term encompassing the entire range of human variability.

The emotionally disturbed child is one who, because of organic and/or environmental influences, chronically displays -

1. inability to learn at a rate commensurate with his intellectual, sensory, motor and physical development;

2. inability to establish and maintain adequate social relationships;

3. inability to respond appropriately in day-to-day life situations;

4. a variety of excessive behaviour ranging from hyperactive, impulsive responses to depression and withdrawal.

Admission Policy:

(a) Criteria -

1. A pupil shall be considered eligible for placement in a class for the emotionally disturbed if, as determined by a thorough diagnostic study, "he is 'emotionally disturbed' AND not profiting from his educational experience and/or he is disturbing to his group because of his emotional problems".

    (1) A pupil will be considered as not profiting from his educational experience when he is underachieving by virtue of not working up to his mental capacity.

    (2) The child will be considered disturbing to his group when he is taking an inordinate portion of the teacher's time and/or distracting or disturbing to the group to the extent that he interferes with the progress of the educational program.

2. Age range - 6 to 16 years old.

3. The child usually should have completed one full year of Kindergarten or regular schooling before placement in class for emotionally disturbed children.

(b) Procedure:

1. Children are referred for placement through the P.S.B.G.M. Co-ordinator of Guidance and Educational Services. Applications for placement can be made from school principals or outside institutions if the child is not attending school at present.

2. Placement is considered only after thorough medical and psychological assessments have taken place.

3. A Committee on Admissions has been formed on which psychiatrists from the major hospitals in greater Montreal are represented. Upon the recommendation of a sub-committee of this Committee consisting of a psychiatrist, social worker, the Board's Medical Consultant and one of the Board's psychologists, the child is considered for placement in one of the existing classes.

4. Parental consent is necessary.

5. Final decision for acceptance rests with the principal and the teacher of the class.

6. Admission to these classes is on a trial basis.

7. Parents of these children are responsible for the continuation of any necessary psychotherapy and/or medication.

Aims and Objectives of Program:

Through the services of a specially trained teacher, an educational program is designed to suit each child on a individual basis taking into account his particular needs and interests. Individual instruction is a necessity. However, the teacher also plans for group activities to assist in forming proper social relationships. Acceptance and understanding of an emotionally-disturbed child is of paramount importance.

Through the medium of this modified educational program the teacher attempts to:

1. make the child feel he is a worthwhile person;
2. help the child lead a normal, happy life;
3. teach skills that will increase his confidence;
4. help the child get along with others;
5. help relieve the child's fears and anxieties;
6. give the child a feeling of belonging;
7. help the child move into a regular school program as soon as he is able.

Existing Facilities:

(a) Within the Greater Montreal Board--

Schools	Classes
Connaught	1 Junior, 1 Intermediate
Lorne	1 Junior, 1 Intermediate
Nesbitt	1 Junior
Royal Arthur	1 Junior
Sir Arthur Currie	1 Junior, 1 Intermediate
Somerled	1 Junior, 1 Intermediate
Victoria	1 Junior

There are 4 - 8 pupils per class.

(b) Within the Community--

Douglas Hospital (10 classes - age range 3-14)
Psychiatric facilities in most General Hospitals
Dickanwise School of Special Education (5 or 6 classes. Age range 5-18)
Miriam Home for Exceptional Children (3 classes. Age range 3½ - 10)
Society for Emotionally Disturbed Children
Demonstration class at Victoria School under the joint auspices of Montreal Children's Hospital and P.S.B.G.M.
Montreal Children's Hospital
Montreal Day Nursery
Allancroft Children's Service Center
Jewish General Hospital - residential units for children and adolescents.

Future Placement:

(a) Within the Greater Montreal Board-- Elementary School level

--placement in a regular class
--placement in one of the special classes

High School level

--placement in a class for emotionally disturbed pupils
--placement in a regular class
--placement in a practical class
--placement in one of the special classes.

(b) Within the Community -- There are a number of existing facilities in the community (e.g. Sheltered Workshops, Special Placement Service of Manpower, etc.) but the placement of the child depends on the nature and degree of the handicap.

CLASS FOR THE PARTIALLY SIGHTED

Definition:

A partially sighted child is one who for educational purposes has a visual acuity of 20/70 or less in the better eye after the best possible correction, and who can use his vision as his chief channel of learning.

Technically speaking, the children who are admitted to the Class for the Partially Sighted have visinn within the 20/200 -20/70 range.

20/200 - what the normal child sees at 200 feet, the child sees at 20 feet.

20/70 - what the normal child sees at 70 feet, the child sees at 20 feet.

Admission Policy:

(a) Criteria--

Poor vision alone is not the only criterion for admission to the class for the Partially Sighted. Usually, there are several other problems in combination with not being able to see well: e.g. perceptual problems, or lower than average intelligence. Children whose only problem is poor vision, can usually manage to make up for this defect with a minimum of special help. However, most children with defective vision who go unnoticed in the regular classroom usually develop poor work habits and emotional problems, as a result of not being able to see well. The classroom teacher should therefore remain alert as to the most common symptoms of eye trouble.

The following checklist was taken from "Education and Health of the Partially Seeing Child" by W. Hathaway.

Observations:

A. Conditions Which May Indicate Visual Disturbances -

1. Eyelids: crusts, redness, styes or swelling.

2. Other: a. watery eyes or discharges;
b. lack of coordination in directing gaze of the two eyes;
c. reddened conjunctiva(mucous membrane lining the eyelid).

B. Behaviour Which May Indicate Visual Disturbances -

1. Rubs eyes frequently.

2. Attempts to brush away blur.

3. Is irritable or cries when attempting close work.

4. Is inattentive in chalkboard, wall-chart, or map lessons.

5. When looking at distant objects:

    a) holds body tense
    b) screws up face
    c) thrusts head forward

6. When reading:

    a) blinks continually
    b) holds book too far from face
    c) holds book close to face
    d) makes frequent change in distance at which book is held
    e) is inattentive during lesson
    f) stops after brief period
    g) shuts or covers one eye
    h) tilts head to one side
    i) tends to reverse words or syllables
    j) tends to look cross-eyed
    k) tends to lose place on page
    l) confuses the following in reading or spelling - o's and a's, e's and c's, n's and m's, h's and h's, and r's, f's and t's.

(b) Procedures:

After the problem has been noticed by the teacher, the following steps are necessary before a decision can be made for placement.

1. The child is referred to the school nurse and is tested on the Snellen Eye Chart.

2. The principal contacts the parents who, in turn, may consult their own doctors.

3. The child is referred to and tested by an ophthalmologist of the Royal Victoria Hospital.

4. The ophthalmologist's recommendation for placement in this class is considered by the principal of the school concerned, and the teacher of the class for the Partially Sighted.

5. The final decision on placement rests with the principal of the school, who has, in conjunction with the parents, to make arrangements for the child's transportation as well as payment of fees if the child comes from an area outside the jurisdiction of the P.S.B.G.M.

6. It is necessary to obtain the parent's consent.

Program:

The program follows that of the regular grade, but using special materials and working at individual levels of attainment and rates of progress. A large print World Book, a large print Thorndike-Barnhart Dictionary, magnifying apparatus, tape recorders and large print texts are part of the equipment used. All children are assigned to classes at their normal grade level and the extent of their participation depends upon their intellectual capacity and emotional maturity. The teacher exercises an important function in enlarging graphs, maps, charts, and written material which is too small in regular print. For the older children, he acts more as a "resource teacher" than a classroom teacher.

Existing Facilities:

(a) Within the Greater Montreal Board--

At present, there is one Special Class for the Partially Sighted within the system of the P.S.B.G.M. It is located at Algonquin School. The ages of the pupils range from 6 - 12, and grade level from I - VII. The maximum number of pupils admitted to this type of class is 12, according to the Provincial Entente (Nov. 4, 1969: Art. 8 - 2.00). The children come from all areas in and around Montreal.

(b) Within the Community:

The Quebec Aid for the Partially Sighted Inc. (Q.A.P.S.) is a non-profit organization. It has a number of useful functions and tries to help partially sighted children to adjust in a realistic manner to the problems they face. It tries to inform parents and teachers of visually handicapped children of how they can be of service to the children in the homes and at school. The following outlines some of the services offered by Q.A.P.S.

1. Low vision aids supplied to pupils.
2. Low vision testing lenses available to hospitals, clinics and doctors upon request.
3. Large print text books supplied when needed.
4. Large print typewriters available on loan, as well as tape recorders.
5. Special paper with large spacing and dark lines, large maps and pencils available.
6. Mobile library of large print books for hospitals, homes for the aged, and schools.

CLASSES FOR THE EDUCABLE MENTALLY RETARDED

Definition:

The term "Educable Mentally Retarded" refers to a child who tests in the 50 to 80 I.Q. range and is therefore handicapped in his ability to learn. Mental retardation may result from a variety of causes, many of which are unknown. Some of the possible primary reasons may include hereditary factors, central nervous system disorders resulting from biochemical, metabolic, hormonal or other organic dysfunction or disease processes. There may or may not be demonstrable brain damage.

Other secondary factors affecting mental functioning may include environmental influences such as serious lack of intellectual stimulation, emotional maladjustment or extreme physical conditions, for example severe malnourishment.

Admission Policy:

Every educable mentally retarded candidate, before admission, is assessed in the areas of visual and auditory acuity, visual and auditory perception, gross and fine motor abilities, and language and speech. In addition, a complete and recent individual intellectual evaluation is administered by a guidance consultant or psychologist.

The child can be placed at the age of 6, but usually he is expected to have completed one year in Kindergarten.

Junior, Intermediate or Senior Class placement is recommended according to the test evaluations.

These results are discussed with the principal, special class teacher and parents. The parents are informed of the consequences of placement and their consent must be obtained.

Program - Means of Achieving the Objectives:

The program is sequential and the child is encouraged to progress at his own speed. Individual instruction at the child's own level is given, while at the same time group activity is emphasized.

In conjunction with regular class material, specialized books, games, and instructional kits are used, the majority of which emphasize the concrete as opposed to the abstract. The areas of the social studies, language arts and numbers are covered along with a great deal of hand-work.

The progress of the child in the above areas is reviewed regularly, and when warranted, the child can be admitted to a regular or practical class.

The pupils participate in school activities which embrace the entire student body such as plays and concerts. In many cases, where the child is mentally and physically prepared to cope with a regular class routine, he may join them for a particular subject such as Music, Gym, French and Geography and/or History. Record players, televisions, radios, and movie projectors are at hand at all times.

Existing Facilities:

(a) Within the Greater Montreal Board -- 41 classes at the elementary school level
15 classes at the high school level

(b) Within the Community --
For severely-retarded (trainable) children: Information with regard to education and care may be obtained from:

1. Quebec Association for Retarded Children
5890 Monkland Avenue
Suite 306, Montreal, Que. 481-0213
Executive Director: Mrs. J. Adler.

2. Montreal Association for the Mentally Retarded
Executive Director: Mr. John McCrea 336-0684

(a) Peter Hall School
2465 Bois Franc Road
Ville St. Laurent, Que.
Principal: Mr. N.M. Cassidy. 336-0684
Specialized school for Trainable Retarded Children without distinction of race or religion.

(b) Adult Sheltered Workshop
2465 Bois Franc Road
Ville St. Laurent, Que.
Director: Mr. D. Monty 336-0684

(c) Special classes in Connaught, Bannantyne, Crawford Park, and Sarah Maxwell Schools of the P.S.B.G.M.

3. Lakeshore Association for Retarded Children
111 Donegani,
Pointe Claire 700, Que. 695-9522

Workshop..... 111 Donegani Avenue
Pointe Claire, Que.

Occupational Training Unit -- 30 students
ages 16 - 44;
average student 21.
Mental age - 4 years to dull normal.

Director: Mr. F. Pellerin 695-9522

4. J.F. Kennedy Memorial School,
215 Elm Avenue,
Beaconsfield, Que.
Principal: Mrs. Genevieve Taylor. 697-1733

Non-resident school for retarded children--
ages 5 - 17.
Operation and jurisdiction of West Island School Commission and
The Catholic School Commission -
110 in 10 classes.

5. Jewish Vocational Services Sheltered Workshop,
5000 Buchan,
Montreal 308, Que.
Director: Dr. Feintuch 735-4217

For teenage retarded children.

6. Douglas Hospital Children's Service,
Psycho-Educational Unit,
6600 Champlain,
Verdun, Que.
Director: Dr. S.J. Shamsie 769-9691 (41).

Full range of services for psycho-educational treatment of retarded children.

EDUCATION FACILITIES FOR SOCIALLY MALADJUSTED CHILDREN

A. In the past, instruction has been given to boys who are detained for varying lengths of time in the Youth Detention Centre, pending a decision of the Juvenile Court concerning their placement in the Boys' Farm at Shawbridge or other institution.

The enrolment, and the educational background of these boys, fluctuate greatly throughout the year.

The Protestant School Board of Greater Montreal has assigned annually two instructors to the Centre, one a teacher of academic subjects, the other of industrial arts.

B. The Elizabeth House -- a home for pregnant teenage girls -- was created as a joint project by the United, Presbyterian and Anglican Churches in Montreal. The governing board, formed by the Churches, is autonomous but financially supported by the three Churches.

The Greater Montreal Board has assigned a high school teacher to provide instruction, at the appropriate grade level, for a maximum of eighteen girls, who reside in the Home for about three months prior to their hospitalization.

APPENDIX I -- SUMMARY OF SPECIAL EDUCATION SERVICES AVAILABLE IN SCHOOLS UNDER THE JURISDICTION OF THE PROTESTANT SCHOOL BOARD OF GREATER MONTREAL

SPECIAL SERVICES AVAILABLE 1971-72

I. Classes for Exceptional Children

Type of Class	No. of Classes	Remarks
(a) Special Classes for Educable Mentally Retarded (EMR)		
- Elementary	36	Approx. I.Q. 50-80
- High School	15	12-20 pupils per class
(b) Emotionally Disturbed (ED)	12	4-8 pupils per class
(c) Aphasic Children (APH)	1	4-8 children
(d) Hard of Hearing - Sr. (HH)	1	5-10 children
Hard of Hearing - Jr.	1	5-10 children
(e) Partially Sighted (PS)	1	10-12 children
(f) Specific Learning Disabilities	25	Training provided by the Adjustment Teachers in 25 Elementary Schools during specific periods
(g) Specific Learning Disabilities (full-time)	3	Maximum 8 children
(h) Practical Classes (P)		Non-academic program in H.S.
1P	10	I.Q. 75-95 approx.
2P	8	12-25 pupils in class
3P	10	
4P	1	
(i) Socially Maladjusted	2	Boys in temporary custody at the Youth Detention Centre
(j) Pregnant School Girls	1	Residential care and education for 18 girls for approximately three months prior to hospitalization

II. Services for Selected Children

Type of Service	No. of Teachers/ Specialists	Remarks
(a) Adjustment Teachers	36	Remedial work in reading and arithmetic and, in some instances programs for perceptually handicapped.
(b) Guidance Consultants	6	Assessment of children for remedial help or psychiatric referrals in each school district.
(c) Elementary Consultants	13	Assisting principals and teachers in developmental and supplemental reading programs and individualized instruction.
(d) Speech Therapist	5	Therapy provided in 12 schools.
Speech Correction Teacher	1	
(e) Teachers at The Learning Center	4	Remedial work related to specific learning problems and liaison between The Montreal Children's Hospital and Schools.
(f) School Psychologists	4	Specific assignments related to assessment, placement and curriculum for exceptional children.
(g) Psychometricians	2	
(h) Special Education Consultant	1	Co-ordination of Special Class curriculum, consultation in placement and promotion of the very slow learner.

III. Guidance and Psychological Services

High Schools - Guidance Counsellors, Teacher Guidance Specialists, and Psychologists.
Elementary Schools - Guidance Consultants and Psychologists.

IV. Psychiatric Services

Hospitals
Mental Health Teams
Consultant Psychiatrists

V. School Health Programme

(See Appendix II, p. 38)

VI. Social Work and Attendance

School social workers and attendance officers
Community agencies
Juvenile Court
(See Appendix III, p. 41)

VII. Subsidized Institutions

Approved educational institutions where formal instruction is given to children of school age and residing in school districts which are under the jurisdiction of this Board.

VIII. Other Resources

Hospitals, agencies and departments with whom a working relationship exists with regard to specialized assessments, medication, placements and family counselling.

IX. Testing Services

Annual standardized testing program
Optional testing
Individual testing

DESCRIPTION OF SPECIAL SERVICES

I.

(a) Special Classes (EMR)

These classes for the educable mentally retarded or the very slow learner are located in all school districts and are in most cases within walking distance for these children who are unable to follow the regular curriculum. A child is placed in these classes only after having been assessed on an individual basis by a guidance consultant or a psychologist. The total assessment of the child includes psychological testing, consideration of academic achievement as well as consideration of language and cultural background. Parental consent is obtained before placement.

The child is given a great deal of extra attention by the teachers due to the fact that the classes have no more than 15 pupils. The child progresses at his own speed in the different subjects and is promoted on the basis of social maturity rather than grade achievements. Although the grouping is not permanent by design, most children remain in special classes throughout their elementary school years, get promoted into high school special classes and graduate after three years.

Throughout the special class program, attempts are being made to integrate these children with the regular students in as many subjects as possible. In subjects like music, physical education, art, home economics, industrial art and typewriting, these children are taught by specialists and quite often they are integrated with the regular classes.

(b) Classes for Emotionally Disturbed Children

Placement in these classes can only be considered after a thorough medical and psychological assessment has taken place. Upon the recommendation of the medical institution the child is considered for placement in one of the five classes established by this Board. A Committee on Admission has been formed on which psychiatrists from the major hospitals in Greater Montreal are represented. Admission to these classes is on a trial basis. Parents of these children are responsible for the continuation of therapy and medication.

The length of stay in these classes varies greatly, but it is expected that a number of children will return to regular classes during the first year, in the beginning for certain subjects only, later to be totally integrated in the school where the class is located. At a still later stage the child is expected to return to the school in his own district. These classes are located in Somerled (2), Herbert Symonds, Sir Arthur Currie. Keith, Lorne and Nesbitt Schools.

In 1967, Dr. H. Caplan, Director of the Department of Psychiatry, Montreal Children's Hospital, organized an intensive in-service training for teachers of the classes for Emotionally Disturbed on a regular basis. During these sessions, attempts are made to relate the clinical findings to the child's functioning in the school setting. Since that time this training program has continued one afternoon per week and substitute teachers are provided for the 7 classes.

(c) Classes for Aphasic Children

This small class has children with loss or impairment of the ability to use the language because of neurological dysfunction. Some may be unable to understand words and others may be unable to speak or speak the words intended although they may appear bright and mentally capable. The curriculum is focused upon language development through speaking, reading and writing. This class is located in Herbert Symonds School.

(d) Classes for Hard of Hearing

These children all have hearing impairments but also other secondary handicaps such as minor brain damage or poor co-ordination and in all cases speech defects. Hearing aids are used and the desks are equipped with microphones and headsets. On a trial basis a loop-system was installed which would allow greater mobility in the room for teacher and pupils. Placement in these classes is based upon medical reports. The two classes are located in Herbert Symonds School.

(e) Classes for Partially Sighted

These children all have low vision of different degrees and also vary in chronological ages as well as in achievement levels from beginners in reading to Grade VII reading. Certain texts are available in extra large prints and typewriters which type large letters are among the special equipment available in the school. All children are assessed by Dr. S. Murphy of the Royal Victoria Hospital before being placed in this class which is located in Algonquin School.

(f) Classes for Perceptually Handicapped

During the past few years there has been an increased awareness of children with specific learning problems. Some children with average or above-average ability do not seem to learn in spite of grouping and/or extra help within the schools. In some cases children have been assessed to have perceptual handicaps and seemed to be in need of specific remedial help. To provide this the Board has, in co-operation with Dr. Sam Rabinovitch of the Montreal Children's Hospital provided opportunity for members of the Board's staff to participate in training programs at the Learning Centre. During the past four summers the Board has paid bursaries to 31 teacher participants as well as part of staff salaries for the 5 week sessions at the Learning Centre of the Montreal Children's Hospital.

The summer sessions are held in Westmount Park School.

As a result of this training in dealing with children with specific learning problems, there are presently some twenty schools under the jurisdiction of this Board where remedial programs are implemented on an individual or small group basis. In most cases these programs are conducted by the Adjustment Teachers in the elementary schools and the children are taken out of regular classes only for certain periods during the day.

(g) Classes for Children with Specific Learning Disabilities

On an experimental basis, three classes are in operation on a full-time basis for children with specific and severe learning disabilities. A turnover to regular classes is expected each year.

(h) Practical Classes

Based upon academic achievement in elementary school and psychological testing, a number of students have been assessed to be slow learners and unable to cope with a regular academic program. These students are promoted into high school practical classes where they are given a specific curriculum in the compulsory subjects and in most cases some opportunities to choose their electives in regular courses. Although most students are employable after terminating their schooling at the third year of the High School, attempts are being made to create a program which has a vocational orientation aspect without training pupils for any specific trade or function.

Two years ago an experimental class at the 4th year level was introduced in Verdun High School, using a new curriculum including Social Studies and Job Orientation.

(i) Classes for Socially Maladjusted Boys

These classes are located in the Youth Detention Centre and as the boys are kept in custody only between court appearances and placements in foster homes or other institutions, the instruction is usually on a tutorial basis with the intention to maintain and also stimulate the academic achievements of these boys. One teacher of academic subjects and one of Industrial Arts are assigned to the Centre.

(j) A Class for Pregnant School Girls

One teacher is assigned for the instruction of 18 pregnant school girls who are living in a residential home, Elizabeth House. Girls receive tuition at their proper educational level prior to hospitalization.

II.

(a) Adjustment Teachers

Teachers are selected by the principals because of their ability to relate to children and their specific training in remedial work in reading, writing and arithmetic.

In some cases these adjustment teachers are also language teachers for new Canadian pupils and, as mentioned earlier, they have related their remedial function to the programs for perceptually handicapped children.

These teachers are not assigned to a class but see different small groups or individuals in need of special attention.

(b) Guidance Consultants

Six Guidance Consultants assist school personnel to deal more effectively with pupils who present behaviour, learning or placement problems. Interviews are conducted with pupils, staff, and sometimes parents. Psychological tests are administered, remedial programs recommended and suggestions for management offered. Reports are prepared for school files. Liaison, when requested, is established with other resource personnel - e.g. (psychiatrist, social worker, speech therapist).

(c) Elementary Consultants

Assigned to the elementary school to provide direct assistance to the classroom teachers with regard to developmental reading programs and individualized instruction.

(d) Speech Therapists

The Speech Therapists usually spend half day to one full day per week in each school. Many cases of serious speech defects are discovered and referred to the speech therapy clinics at the general hospitals with whom they have excellent liaison while other cases are given remedial help in the school.

(e) Teachers at the Learning Centre

The four teachers assigned to the Learning Centre at the Montreal Children's Hospital follow up cases from the Centre and serve as liaison personnel between the hospital and the schools. They serve as therapists in the schools, and they also diagnose problems and prescribe remedial work to the classroom teachers.

(f) School Psychologists

The four psychologists are given specific assignments with regard to assessment of individual classes and testing program throughout the system. They are able to administer projective tests and, as well, they can relate clinical interpretations to educational practices. Presently one psychologist is directly responsible for the collecting of data from hospitals and therapists, teachers and administrators which will serve as basis for admission to our classes for Emotionally Disturbed Children. Another psychologist is reviewing the students in our Special Classes to ensure that no pupil remains in a class unless he can benefit from this placement. Another assignment presently carried out is related to the re-assessment of the Classes for Hard of Hearing and the Aphasic Children as well as a co-ordination of the admission to these classes.

(g) Psychometricians

Two psychometricians are assigned to projects requiring statistical analyses.

(h) Special Education Consultant

The main function is to co-ordinate the curriculum of the Special Classes and to introduce innovations in texts and work books for the very slow learners. Promotion policies, forecasts, and planning for classes at the high school level are other phases of this work as well as the direct consultation and help to the Special Class teachers.

III. Guidance Services

In the high schools, 92 part-time counsellors are providing academic and vocational counselling on a regular basis to all students. The trend has been over the past year to reduce the number of counsellors and at the same time increase the counselling time for the trained counsellors to provide adequate service in each high school. In all high schools each student is seen by an assigned counsellor for programing purposes but a large number of students make use of the Guidance services for personal problems which may interfere with the academic work or for course selections or for longitudinal career planning.

Each year a number of staff members, enrolled in graduate studies at Macdonald College leading to a Master's degree and provincial certification in School Guidance and Counselling, serve an internship as part of the requirement for the degree. This year five staff members are serving such internship in assigned Guidance Departments in high schools under the jurisdiction of this Board. Sixteen heads of Guidance Departments have been appointed for 1971-72.

IV. Psychiatric Services

Through the co-operation of some of the major hospitals* in Montreal, most of our schools have access to a consultant psychiatrist. This service is a diagnostic one. Treatment, when needed must be obtained through the hospital clinics or privately.

The main feature of this program is that the psychiatrist visits the school to see the pupil, parents, teachers, and principal. The service is administered by the Board's Curriculum Department as part of the Guidance and Educational Services program. Dr. Alistair MacLeod, Director of the Mental Hygiene Institute and Dr. Cyril Cahill, Medical Director, act as advisors to us on these matters.

On an experimental basis, the Jewish General Hospital is continuing to carry out a project in community psychiatry. The psychiatric services are offered in a preventive fashion through a Mental Helth Team.

Members are placed in specific schools for at least one half day per week. They get acquainted with teachers, pupils, administrators and the curriculum and will discuss problems and make recommendations before it may become a psychiatric referral case. Other schools in the district are served as usual on an emergency referral basis.

The Queen Elizabeth Hospital and the Royal Victoria Hospital are carrying out a similar project under the supervision of Dr. C. Benierakis.

The Douglas Hospital is giving consultation on a referral basis as well as from a preventive point of view through frequent meetings with teachers, administrators and consultants under the supervision of Dr. Shamsie and Dr. Scully.

* Albert Prevost Institute
Children's Psychiatric Clinic of the Royal Victoria Hospital
Douglas Hospital
Jewish General Hospital
Lakeshore General Hospital
Mental Hygiene Institute
Mont-Providence
Montreal Children's Hospital
Queen Elizabeth Hospital

The Montreal Children's Hospital has been able to provide a bilingual psychiatric service to Victoria School in addition to the extensive service given to the classes for Emotionally Disturbed Children. Consultation and in-service training is also provided by Dr. H. Caplan and his staff on a regular basis throughout the year.

V. Subsidized Institutions

Although the Board's policy is to integrate all children as far as possible, in some cases the very nature of the child's disability makes it advisable to retain him in an institution specially equipped to care for him.

At the present time the Board subsidizes the educational units at the Montreal Children's Hospital, the Jewish General Hospital and the Douglas Hospital.

Other institutions also receive grants, and classroom space is allotted annually to several institutions which provide education for exceptional and handicapped children.

VI. Other Resources

A good working relationship is maintained between the Department of Student Personnel Services and hospitals and community agencies.

VII. Testing Services

The Board is carrying out a system-wide testing program in the following areas:

Elementary Schools:

At the Grades IV & VI levels -

1. Stanford Achievement Test Battery which yields scores in Reading and Arithmetic.

2. Lorge Thorndike Intelligence Tests which yield verbal and non-verbal scores.

3. Modern Maths Supplement to the Canadian Tests of Basic Skills as an experimental assessment.

At the principal's discretion the Metropolitan Reading Readiness Tests are administered at Kindergarten - Grade I levels.

High Schools:

At the fist year level: The Henmon Nelson Mental Ability Tests (H-N)

At the second year level: The Differential Aptitude Tests (DAT)

(a) Numerical Ability
(b) Verbal Reasoning
(c) Abstract Reasoning

These tests have been found very useful for counselling purposes and as reliable aids in course selection for students.

Utilizing the Educational Testing Services (ETS), Princeton, the Board is using the College Entrance Examination Board's (CEEB) tests:

At the third year high school level:

The Preliminary Scholastic Aptitude Test (PSAT). The test is administered in October each year. This year it is administered on a Saturday, and the cost is borne by the individual student.

These multiple choice questions are useful exercises for the students and prepare them well for the tests in the final year. The tests are good predictors of academic potential and are very useful to the Guidance Specialist in his dealings with students and parents.

At the third and fourth year levels:

Scholastic Aptitude Tests (SAT) and Achievement Tests (ACH). These tests are administered on Saturdays only at certain test centres in the Board's high Schools in January, March, May and July of each year.

The tests are voluntary for the third and fourth year high school students and the cost is borne by the individual student.

The tests are prerequisites for admission to all American universities.

At the fourth year level:

The Service for Admission to College and University (SACU). The SACU tests are prerequisites for admission to all Canadian universities and junior colleges. These tests are administered during a regular school day and the cost is borne by the individual student who chooses to write them.

At the principal's discretion other interest and aptitude tests are made available to students for administration and interpretation in the schools.

Also, at the request of the principals, individual assessment is available throughout the year by the psychologists and Guidance Specialists.

LIST OF SCHOOLS WITH CLASSES FOR EXCEPTIONAL CHILDREN

Municipality	Name of Schools	EMR	ED	APH	HH	PS	ADJ	ENG. FOR NEW CANADIANS	SPEC. LEARNING DISABILITY (PH)
	High Schools								
MONTREAL	Baron Byng	2						2	
	High School of Montreal								
	Monklands	3							
	Rosemount	1							
LACHINE	Lachine	2							
ST. LAURENT	St. Laurent	3							
VERDUN	Verdun	4							
WESTMOUNT	Westmount		1						
	(Elizabeth House)*								
	1 Class								
	Elementary Schools								
MONTREAL	Bancroft	2					2		1
	Barclay	2					2		1
	Bedford						1		1
	Connaught		2						
	Coronation						1		
	Devonshire	2					1		
	Drummond						1		1
	Edward VII	1					1		1
	Herbert Symonds	2		1	2		1		1
	Iona Avenue						2		

*Class for Pregnant School Girls

(Continued next page)

LIST OF SCHOOLS WITH CLASSES FOR EXCEPTIONAL CHILDREN (Continued)

Municipality	Name of Schools	EMR	ED	APH	HH	PS	ADJ	ENG. FOR NEW CANADIANS	SPEC. LEARNING DISABILITY (PH)
	Elementary Schools								
MONTREAL	Royal Vale						1		
	Logan						1		1
	Lorne	2	2				1		
	Maisonneuve E, F	2							
	Mountrose	1							
	Nesbitt	2	1				1		
	Peace Centennial	1							
	Rosedale						1		1
	Royal Arthur	2					1		
	Sir Arthur Currie	2	2				1		
	Somerled		2						
	Van Horne	2					1	1	
	Victoria		1						
	Westminster						1	1	
	Willingdon						1	2 (Full time)	
LACHINE	Cecil Newman						1		
	Central Park	2							
	Keith						1		
	Lachine Rapids	2					1	1	
	Summerlea						1	1	
TOWN OF MOUNT ROYAL	Algonquin					1	1		
	Carlyle						1		
	Dunrae Gardens						1		
	Russell						1		

(Continued next page)

LIST OF SCHOOLS WITH CLASSES FOR EXCEPTIONAL CHILDREN (Continued)

Municipality	Names of Schools	EMR	ED	APH	HH	PS	ADJ	ENG. FOR NEW CANADIANS	SPEC. LEARNING DISABILITY (PH)
	Elementary Schools								
OUTREMONT	Guy Drummond	2					1		
	Strathcona Academy	1							
POINTE-AUX-TREMBLES	Montreal East	1							
ST. LAURENT	Herbert Purcell	1					1		1
	Parkdale	3	1				1		1 (Full time)
	Roxboro						1		
	Westbrook						1		1
	Westpark						1		
SAULT AU-RECOLLET	Maple Hill	1							
	Sarah Maxwell						1		1
VERDUN	Bannantyne	2					1		
	Riverview	1					1		1
	Woodland								
WESTMOUNT	Roslyn						1		
	Westmount Park	2					1		1
		56	12	1	2	1	41	2	20

EMR = Educable Mentally Retarded; ED = Emotionally Disturbed; APH = Aphasic; HH - Hard of Hearing; PS = Partially Sighted; ADJ = Adjustment; ENG. FOR NEW CANADIANS = English for New Canadians; SPEC. LEARNING DISABILITY; (PH) = Specific Learning Disability (Perceptually Handicapped).

July 1971

APPENDIX II--SCHOOL HEALTH PROGRAM

The school health program is a development within the framework of a community public health program with the primary objective of studying and assisting wherever possible in the maintenance and improvement of health, seeking the full development of the child's potential.

The health program for pupils contains seven main categories.

(1) Health History

(2) Health Appraisal
   a) Teacher Observation of pupils
   b) Classroom Screening Tests
   c) Teacher-Nurse Conferences
   d) Medical Examinations

(3) Communicable Disease Control

(4) Follow-up

(5) Health Counselling

(6) Health Teaching

(7) Emergency Care

The P.S.B.G.M. provides nurse and physician service in 26 elementary and 14 high schools. The physician visits the school weekly and undertakes the medical supervision of pupils which includes carrying out medical examinations. He is responsible for determining the medical classification for physical education activities; advising the principal and teachers regarding the health status of pupils; referring health problems for investigation; and providing guidance and advice on health problems as required.

The nurse attends the school on a full time or part-time basis depending on the pupil enrolment. She is required to work closely with the principal and teacher as a member of the school team. The nurse is trained to deal with groups of well children and to provide health counselling to all concerned.

The nurse is responsible for the following:

1. To assist the physician in the medical examination of pupils.

   Medical examinations are done on all new pupils, those in the first and final year of elementary school, those in either the first or second level of high school

those who have other than "A" classification for participation in the physical education programme, and pupils referred by the teacher for cause.

2. To undertake regular activities in the classroom in co-operation with the teacher which includes:
   a) Determination of height and weight.
   b) Vision examination.
   c) Dental imspection.
   d) General inspection regarding cleanliness of clothing, skin, hair and posture.

3. Teacher-Nurse conferences to discuss the pupils' progress, behaviour, etc.

4. Referrals of pupils with defects for further medical or psychiatric care. The nurse plays an important role in directing the parents in the use of the community resources, such as, hospital clinics, local health clinics, Jr. Red Cross, etc.

5. Follow-up of referred cases. The nurse takes a personal interest in the child's problem and works closely with the family and medical personnel involved in order to help the child in his achievement.

6. Health Counselling. The nurse is concerned with helping all members of the school to understand personal and health problems and to work toward the improvement of attitudes and practices that are conducive to happier living.

7. Health Teaching. The nurse plays an active part in the teaching programs on Drug Education, Personal Hygiene, Sex Education, Nutrition, Dental Hygiene, etc.

8. Communicable disease control. The nurse educates the pupils and parents regarding the need for immunizations and good community sanitation programmes.

9. Emergency care. The nurse is trained to deal with sudden illness and accidents which may occur. She is available for instructing school staff in the recognition of various categories of emergencies that may arise and in their management.

In addition to the nurse and physician service the Board also carries out an Audiometric Testing Program under the direction of a registered nurse. With the use of a Maico Audiometer, she routinely screens pupils in Kindergarten and Grade I, **pupils new** to the school and new pupils in Speech Therapy and Special Classes. Children who are suspected of having a hearing problem may also be referred for testing.

If the initial test on a child shows a hearing loss this may be due to the presence of a cold, wax in the ears or some other common problem of limited duration. This child is medically examined by either the school physician or his personal physician in an attempt to determine the cause of failure. Following this examination, the child's hearing is re-tested in about one month's time, and should the re-test show a failure the parents are notified and advised that the child should see a specialist for further consultation.

When a definite hearing loss is established recommendations are made to have the child placed in the most suitable environment.

APPENDIX III--SCHOOL SOCIAL WORK AND ATTENDANCE

The functions of the school social work and attendance service include:

1. Casework service with the individual pupil toward the correction of certain personal, social or emotional maladjustments.

2. Case work service with parents as an integral part of the task of helping the pupil and to increase parents' understanding, their constructive participation, and their use of appropriate resources.

3. Case consultation and collaboration with other school personnel to gather and give information on a case, and to establish and plan for respective roles in the modification of the pupil's behaviour.

4. Co-operative action with other school personnel in referral of pupils, co-operation with parents, contact with the community social agencies, co-ordination of school social work services with the work of these agencies, and co-operation with such agencies in determining needs for and developing additional community resources.

The foregoing functions are expressed in broad categories and require further explanation of the various activities of the school social workers.

The service is available to all schools in this Board and referrals are received from principals. In addition, referrals also come from community agencies, clinics, parents, relatives and citizens. The emphasis has always been preventive with the aim of finding those children with symptoms of maladjustment early in their school life so that the causes can be determined and the social functioning of the child re-established.

School Attendance and Children's Protection

One of the most common symptoms is irregular school attendance and the school social work and attendance service has the responsibility for enforcing the compulsory school attendance law. This is a very complex job which requires dealing with a wide variety of chronic and severe social and emotional problems. Many of these children come from families who are socially and economically deprived and many have serious learning problems because education is not valued at home and parents are unable or unwilling to give them the training and example that is so necessary.

The school has the responsibility for the education of all children in the community and occupies a strategic position with respect to the protection of children. It has a legal responsibility for their regular attendance at school, and unlike other agencies, it can not close its case when the parents resist or refuse to co-operate. In a great many cases the school is the only place where children can get the attention and protection that they need. The school social worker has to help the parents to get to know him not as an authoritarian and hostile authority, but as a concerned and understanding professional person who uses his lawful authority to help both child and parents with their mutual problem. In cases of serious mal-treatment of children, referral is made to the Family and Children's Services for further investigation and possible court action.

Community Mental Health

The school social workers have participated actively and regularly on the mental health teams which have been assessing children with social and emotional problems in the schools. The school social worker's contribution is unique in that he has often known the family in the past and can provide the psychiatrist with social history which he has secured either from his own contact with the family and visits to the home or which other social agencies who are working with the family have shared with him. The child who has problems at school which interfere with his school progress needs the help of the team to solve these problems. The school social worker, being a member of the team, finds that parents will accept him as a member of the school staff, and a feeling of mutual trust is built up so that there is more effective service to the child.

Liaison with Organizations Interested in the Welfare of Children

All the school social workers are active in professional groups and community councils and maintain contacts with citizens from neighborhood associations. In the complex network of organizations interested in children, the school social work service has a particular concern: that of education.

There is an increasing trend toward the organization of more citizens' self-help groups with aims for community betterment. Where their efforts are responsible and constructive, it is good policy to work with them because they know and have experienced conditions in their areas.

In professional groups, the school social workers have a strong influence, especially with study or planning committees that work on particular needs: placement of children, children's protections, addictions, etc.

Integration in the Student Personnel Services

In the school environment, the school social work and attendance service works with other related branches as a team; such as guidance, psychology, medicine, etc. For evaluation and treatment, the school social work service is called on to play a specific role and also to offer its particular contribution to the professional team assigned to give pupils the more specialized services which they might need.